

Ohio Campaign Finance Report

Prescribed by Secretary of State 02/01

05 DEC 16 PM 1:35

FILED

FRANKLIN COUNTY
CLERK OF ELECTIONS

Full Name of Committee CITIZENS FOR RANKIN						Registration Number, If PAC					
Full Name of Candidate MIKE R. RANKIN											
Street Address 545 EAST TOWN STREET						Office Sought JUDGE, MUNICIPAL COU			District FRANKLIN CO		
City COLUMBUS						State O II		Zip Code 43215			
Type of Report (place X to the left of report type)		Pre-Primary		Post-Primary		X Pre-General		Post-General		Annual Year	
		July		August		September					
		Monthly		Monthly		Monthly		Termination			
Amended Report? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				Report Electronically filed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				Date of Election		M D Y 1 1 0 8 0 5	

For candidates only, during an election year: if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box. No other forms are required at a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$ 4,966.80
2. Total monetary contributions (From Form No. 31-A)	\$ 34,036.00
3. Total other income (From Form No. 31-A-2)	\$ 411.64
4. Total funds available (sum of lines 1, 2, 3)	\$ 39,414.44
5. Total monetary expenditures (From Form No. 31-B)	\$ 12,448.28
6. Balance on hand (line 4 minus line 5)	\$ 26,966.16
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$ 6,019.33
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$ 0.00
9. Outstanding loans owed by committee (From Form No. 31-G)	\$ 11,150.00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$ 2,201.11
11. Outstanding loans owed to committee (From Form No. 31-K)	\$ 0.00
12. Value of independent expenditures made (From Form No. 31-L)	\$ 0.00
13. For electronic filing entries only	\$

THE INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION. WHOEVER COMMITTS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE

LAURA T. RIGGS-KOLMAN, TREAS.

Print Name and Title (Treasurer and Deputy Treasurer only)

Laura T. Riggs-Kolman
Signature

12-16-05
Date

Contribution
pages 34

Expenditure
pages 2

Other
pages 7

Total
pages 43

In-Kind Contributions Received

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Name of Committee in Full CITIZENS FOR RANKIN																
Full Name of Contributor MIKE R. RANKIN		Employer, Occupation, Labor Organization *		Registration Number, if PAC												
Street Address 2432 WYNCOURTNEY COURT		Description of Item or Service MAGNETIC TAPE		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>6</td> <td>2</td> <td>0</td> </tr> <tr> <td>0</td> <td>5</td> <td></td> <td>6.43</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	2	0	0	5		6.43
M	D	Y	Fair Market Value													
0	6	2	0													
0	5		6.43													
City POWELL		State O H	Zip Code 43065	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
Full Name of Contributor MIKE R. RANKIN		Employer, Occupation, Labor Organization *		Registration Number, if PAC												
Street Address 2432 WYNCOURTNEY COURT		Description of Item or Service T-SHIRTS		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>6</td> <td>2</td> <td>3</td> </tr> <tr> <td>0</td> <td>5</td> <td></td> <td>101.85</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	2	3	0	5		101.85
M	D	Y	Fair Market Value													
0	6	2	3													
0	5		101.85													
City POWELL		State O H	Zip Code 43065	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
Full Name of Contributor BILL HEDRICK		Employer, Occupation, Labor Organization *		Registration Number, if PAC												
Street Address 838 THURBER DRIVE WEST		Description of Item or Service POSTAGE		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>6</td> <td>3</td> <td>0</td> </tr> <tr> <td>0</td> <td>5</td> <td></td> <td>59.20</td> </tr> </table>	M	D	Y	Fair Market Value	0	6	3	0	0	5		59.20
M	D	Y	Fair Market Value													
0	6	3	0													
0	5		59.20													
City COLUMBUS		State O H	Zip Code 43201	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO												
Full Name of Contributor BILL HEDRICK		Employer, Occupation, Labor Organization *		Registration Number, if PAC												
Street Address 838 THURBER DRIVE WEST		Description of Item or Service FOOD, BEVERAGES		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>7</td> <td>1</td> <td>4</td> </tr> <tr> <td>0</td> <td>5</td> <td></td> <td>64.00</td> </tr> </table>	M	D	Y	Fair Market Value	0	7	1	4	0	5		64.00
M	D	Y	Fair Market Value													
0	7	1	4													
0	5		64.00													
City COLUMBUS		State O H	Zip Code 43201	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO												
Full Name of Contributor MIKE R. RANKIN		Employer, Occupation, Labor Organization *		Registration Number, if PAC												
Street Address 2432 WYNCOURTNEY COURT		Description of Item or Service POSTAGE		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>8</td> <td>0</td> <td>3</td> </tr> <tr> <td>0</td> <td>5</td> <td></td> <td>29.60</td> </tr> </table>	M	D	Y	Fair Market Value	0	8	0	3	0	5		29.60
M	D	Y	Fair Market Value													
0	8	0	3													
0	5		29.60													
City POWELL		State O H	Zip Code 43065	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO												
Full Name of Contributor MIKE R. RANKIN		Employer, Occupation, Labor Organization *		Registration Number, if PAC												
Street Address 2432 WYNCOURTNEY COURT		Description of Item or Service YARD SIGNS		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>8</td> <td>1</td> <td>9</td> </tr> <tr> <td>0</td> <td>5</td> <td></td> <td>1,763.75</td> </tr> </table>	M	D	Y	Fair Market Value	0	8	1	9	0	5		1,763.75
M	D	Y	Fair Market Value													
0	8	1	9													
0	5		1,763.75													
City POWELL		State O H	Zip Code 43065	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
Full Name of Contributor MIKE R. RANKIN		Employer, Occupation, Labor Organization *		Registration Number, if PAC												
Street Address 2432 WYNCOURTNEY COURT		Description of Item or Service POSTAGE		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>0</td> <td>9</td> <td>2</td> <td>6</td> </tr> <tr> <td>0</td> <td>5</td> <td></td> <td>37.00</td> </tr> </table>	M	D	Y	Fair Market Value	0	9	2	6	0	5		37.00
M	D	Y	Fair Market Value													
0	9	2	6													
0	5		37.00													
City POWELL		State O H	Zip Code 43065	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												
Full Name of Contributor MIKE R. RANKIN		Employer, Occupation, Labor Organization *		Registration Number, if PAC												
Street Address 2432 WYNCOURTNEY COURT		Description of Item or Service POSTAGE		<table border="1"> <tr> <td>M</td> <td>D</td> <td>Y</td> <td>Fair Market Value</td> </tr> <tr> <td>1</td> <td>0</td> <td>0</td> <td>3</td> </tr> <tr> <td>0</td> <td>5</td> <td></td> <td>925.00</td> </tr> </table>	M	D	Y	Fair Market Value	1	0	0	3	0	5		925.00
M	D	Y	Fair Market Value													
1	0	0	3													
0	5		925.00													
City POWELL		State O H	Zip Code 43065	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO												

* Required for contributions from individual over \$100 to statewide and General Assembly candidates. IF contributor is self-employed, occupation rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear.

[R.C. 3517.10(B)(4)]

In-Kind Contributions Received

Prescribed by Secretary of State 2/01

Name of Committee in Full CITIZENS FOR RANKIN				
Full Name of Contributor SAIA & PIATT, PLL	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 713 S. FRONT STREET	Description of Item or Service INVITATIONS	M 0	D 9	Fair Market Value 46.50
City COLUMBUS	State O H Zip Code 43215	Y 0	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor SAIA & PIATT, PLL	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 713 S. FRONT STREET	Description of Item or Service POSTAGE	M 0	D 9	Fair Market Value 185.00
City COLUMBUS	State O H Zip Code 43215	Y 0	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor SAIA & PIATT, PLL	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 713 S. FRONT STREET	Description of Item or Service FOOD, BEVERAGES	M 0	D 9	Fair Market Value 691.00
City COLUMBUS	State O H Zip Code 43215	Y 0	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor OHIO DEMOCRATIC PARTY	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 271 E. STATE STREET	Description of Item or Service POLITICAL CONSULTANT	M 0	D 9	Fair Market Value 2,000.00
City COLUMBUS	State O H Zip Code 43215	Y 0	Received at Fundraising Event? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
Full Name of Contributor MARK DEMPSEY	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 1305 WESTWOOD	Description of Item or Service FOOD, BEVERAGES	M 0	D 8	Fair Market Value 55.00
City COLUMBUS	State O H Zip Code 43212	Y 3	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor MEGAN DEMPSEY	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address 1305 WESTWOOD	Description of Item or Service FOOD, BEVERAGES	M 0	D 8	Fair Market Value 55.00
City COLUMBUS	State O H Zip Code 43212	Y 3	Received at Fundraising Event? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Fair Market Value
City	State Zip Code	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	
Full Name of Contributor	Employer, Occupation, Labor Organization *	Registration Number, if PAC		
Street Address	Description of Item or Service	M	D	Fair Market Value
City	State Zip Code	Y	Received at Fundraising Event? <input type="checkbox"/> YES <input type="checkbox"/> NO	

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[R.C. 3517.10(B)(4)]